

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO**

IN RE: CASE NO. 21-03574 ESL
JAIME NIETO DEL TORO
Debtor CHAPTER 7

DEBTOR MOTION TO AMEND SCHEDULES E/F AND MASTER ADDRESS LIST

TO THE HONORABLE COURT:

NOW COME(S) Debtor(s) herein, JAIME NIETO DEL TORO, by his undersigned attorney, and very respectfully ALLEGE(S) AND PRAY(S):

1. On this date debtor is amending his Schedule E/F in order to include additional fine with:

AEE
PO BOX 363508
SAN JUAN, PR 00936

2. Include the following assignee of AEE:

LUMA ENERGY
PO BOX 361110
SAN JUAN, PR 00936

WHEREFORE, Debtor respectfully requests that the Amendments be accepted for the continuation of the proceedings and that all other remedies which are proper and just be granted.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY on this same date I electronically filed the foregoing document with the clerk of the court using the CM/ECF System which will send notification of such filing to the following: Chapter 7 Trustee, US Trustee and to all creditors registered to said system. On this same date, I have sent copy of said document by regular mail to all parties in interest that are non CM/ECF participants as of the creditor matrix attached hereto.

In San Juan, Puerto Rico, this 28th day of January 2021.

By:/s/ Juan C. Bigas Valedon
JUAN C. BIGAS VALEDON
Attorneys for Debtor
U.S.D.C. NO. 215404
P.O. Box 7011
Ponce, P.R. 00732-7011
Tel. 259-1000; Fax 984-0351

Fill in this information to identify your case:

Debtor 1	JAIME R NIETO DEL TORO		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		DISTRICT OF PUERTO RICO, SAN JUAN DIVISION	
Case number (if known)	<u>3:21-bk-3574</u>		

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount	
2.1	ASUME Priority Creditor's Name	Last 4 digits of account number <u>5140</u>	<u>\$300.00</u>	<u>\$300.00</u>	<u>\$0.00</u>
	PO BOX 71316 SAN JUAN, PR 00936 Number Street City State Zip Code	When was the debt incurred? <u>2021</u>			
	As of the date you file, the claim is: Check all that apply				
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
	Type of PRIORITY unsecured claim:				
	<input checked="" type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify <u>CHILD SUPPORT</u>				
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1 NIETO DEL TORO, JAIME R

Case number (if known)

3:21-bk-3574

2.2	ASUME Priority Creditor's Name	Last 4 digits of account number <u>0467</u>	\$436.44	\$436.44	\$0.00
	PO BOX 71316 SAN JUAN, PR 00936 Number Street City State Zip Code	When was the debt incurred? <u>2021</u>			
	As of the date you file, the claim is: Check all that apply				
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
	Type of PRIORITY unsecured claim:				
	<input checked="" type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____				
	CHILD SUPPORT				

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?** No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim	
4.1	AEE Nonpriority Creditor's Name	Last 4 digits of account number <u>5045</u>	<u>\$9,267.16</u>
	PO BOX 363508 SAN JUAN, PR 00936 Number Street City State Zip Code	When was the debt incurred? <u>2018</u>	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>SERVICES</u>		

Debtor 1 NIETO DEL TORO, JAIME R

Case number (if known)

3:21-bk-3574

4.2	BANCO POPULAR DE PUERTO RIC Nonpriority Creditor's Name	Last 4 digits of account number	<u>4302</u>	<u>\$13,000.18</u>
PO BOX 362708 SAN JUAN, PR 00936 Number Street City State Zip Code		When was the debt incurred?		
		<u>04/29/2013</u>		
As of the date you file, the claim is: Check all that apply				
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u></p>				

4.3	BMW FINANCIAL SERVICES Nonpriority Creditor's Name	Last 4 digits of account number	<u>32</u>	<u>\$34,332.00</u>
PO BOX 9001065 LOUISVILLE, KY 40290 Number Street City State Zip Code		When was the debt incurred?		
		<u>10/29/2016</u>		
As of the date you file, the claim is: Check all that apply				
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>AUTO LOAN DEFICIENCY</u></p>				

4.4	RS CONSULTING SERVICES, INC Nonpriority Creditor's Name	Last 4 digits of account number	<u>3688</u>	<u>\$43,384.34</u>
PO BOX 968 CAGUAS, PR 00726 Number Street City State Zip Code		When was the debt incurred?		
		<u>2018</u>		
As of the date you file, the claim is: Check all that apply				
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>RENT</u></p>				

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 NIETO DEL TORO, JAIME R

Case number (if known)

3:21-bk-3574

Name and Address

**ISLAND PORTFOLIO SERVICES
LLC
PO BOX 361110
SAN JUAN, PR 00936-1110**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

4302

Name and Address

**LUMA ENERGY
PO BOX 364267
SAN JUAN, PR 00936**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

5045**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ 736.44
	6b. Taxes and certain other debts you owe the government	6b. \$ 0.00
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ 0.00
	6e. Total Priority. Add lines 6a through 6d.	6e. \$ 736.44
Total claims from Part 2	6f. Student loans	6f. \$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ 99,983.68
	6j. Total Nonpriority. Add lines 6f through 6i.	6j. \$ 99,983.68

Fill in this information to identify your case:			
Debtor 1	JAIME R NIETO DEL TORO		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF PUERTO RICO, SAN JUAN DIVISION		
Case number (if known)	<u>3:21-bk-3574</u>		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

/s/ JAIME R NIETO DEL TORO

JAIME R NIETO DEL TORO

Signature of Debtor 1

Date January 27, 2022

X

Signature of Debtor 2

Date _____

Label Matrix for local noticing

0104-3

Case 21-03574-ESL7

District of Puerto Rico

Old San Juan

Fri Jan 28 10:45:15 AST 2022

BMW FINANCIAL SERVICES NA LLC DEPARTMENT

AIS PORTFOLIO SERVICES LP

4515 N SANTA FE AVE DEPT APS

OKLAHOMA CITY, OK 73118-7901

ISLAND PORTFOLIO SERVICES LLC AS SERVICER OF

P O BOX 361110

SAN JUAN

SAN JUAN, PR 00936-1110

US Bankruptcy Court District of P.R.

Jose V Toledo Fed Bldg & US Courthouse

300 Recinto Sur Street, Room 109

San Juan, PR 00901-1964

ASUME

PO BOX 71316

SAN JUAN, PR 00936-8416

BANCO POPULAR DE PUERTO RIC

PO BOX 362708

SAN JUAN, PR 00936-2708

(p)BMW FINANCIAL SERVICES

CUSTOMER SERVICE CENTER

PO BOX 3608

DUBLIN OH 43016-0306

ISLAND PORTFOLIO SERVICES LLC

PO BOX 361110

SAN JUAN, PR 00936-1110

RS CONSULTING SERVICES, INC

PO BOX 968

CAGUAS, PR 00726-0968

JAIME R NIETO DEL TORO
1511 AVE PONCE DE LEON
CIUDADELA PLAZA DEL MUSEO 1400 APT 14101
SAN JUAN, PR 00909JUAN CARLOS BIGAS VALEDON
JUAN C BIGAS LAW OFFICE
PO BOX 7011
PONCE, PR 00732-7011MONSITA LECAROZ ARRIBAS
OFFICE OF THE US TRUSTEE (UST)
OCHOA BUILDING
500 TANCA STREET SUITE 301
SAN JUAN, PR 00901NOREEN WISCOVITCH RENTAS
PMB 136
400 CALAF STREET
SAN JUAN, PR 00918-1313

The preferred mailing address (p) above has been substituted for the following entity/entities as so specified by said entity/entities in a Notice of Address filed pursuant to 11 U.S.C. 342(f) and Fed.R.Bank.P. 2002 (g) (4) .

BMW FINANCIAL SERVICES
PO BOX 9001065
LOUISVILLE, KY 40290

The following recipients may be/have been bypassed for notice due to an undeliverable (u) or duplicate (d) address.

(u)RS CONSULTING SERVICES, INC.

(d)BMW FINANCIAL SERVICES NA LLC DEPARTMENT

End of Label Matrix

Mailable recipients 12

Bypassed recipients 2

Total 14

AIS PORTFOLIO SERVICES LP

4515 N SANTA FE AVE DEPT APS

OKLAHOMA CITY OK 73118-7901